## 11.

Letter from Florida State University – Department of Statistics and Statistical Consulting Center



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Mr. Bernie Windham 12164 Whitehouse Road Tallahassee, FL

Dear Bernie:

I reviewed

The standard of care regarding amalgam removal among Florida's licensed dentists,

a copy of a fax transmission sent on January 7, 2002 (pages stamped at the bottom 008858 to 008864.) From the fax, "... a response rate of 16%. This is a very favorable response rate." This conclusion is astounding: see below.

In teaching STA 5225 and 4222, Sample Surveys, I often use as a reference *How to Conduct your own Survey*, by Priscilla Salant and Don Dillman. Dillman is a Senior Survey Methodologist at the U.S.Bureau of the Census and Director of the Social and Economic Sciences Research Center at Washington State University. On p. 43, they say

For example, one can reasonably expect a 60 percent (or even higher) response rate in a mail survey of the general population, given the use of personalized cover letters, attractive questionnaires, and follow-up contacts. In well-organized surveys, similar rates can also be expected with the other methods.

Furthermore, the fax states that among the non-member dentists the response rate was 4%. For this group, it is stated that 747 calls were made, including 224 callbacks. Salant and Dillman say, "... however, in local surveys for which budgets may be smaller, try making six calls to each person in the sample." Very low response rates can lead to large biases in the survey results. If the callers had persisted and used the methods in Salant and Dillman, they would have been able to compare the responses of those who answered immediately with those who answered later. It might have been possible to make some inferences about the opinions of those who still refused to answer.

The fax says "This identification [of the FDA] was made to increase participation rates. A phone call from a trusted source acts to increase response rates without introducing bias." Suppose that most Florida dentists know the position of the Florida Dental Association (FDA) on the removal of amalgam fillings, and that the FDA has disciplined dentists who have not followed their position. After the caller had identified the question as originating from the FDA, the respondents might be very wary of responding "Yes" to the long and legal-sounding question "Would you remove amalgam that contains mercury from a non-allergic patient in order to treat a systemic medical condition by removing toxic substances from the body?" Identification of the FDA has served to bias the results.

This is a very disappointing study.

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Yours truly,

Duane Meeter

**Professor**